PART B - FEE(S) TRANSMITTAL

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10/705272				(J) Ja	21 1	(Signature)	
APPLICATION NO FILING DATE		FIRST NAMED INVENTOR	·	ATTORNEY DOCKET NO.	CONFIRMATION NO		
10/705.272 11/08/2003 THE OF INVENTION, VOLUME CONTROLLINKED WITH ZOO			Robert P. Cazier CONTROL				
APPUN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	09/05/2008	
EXAM	INER	ART UNIT	CLASS-SUBCLASS]			
LAM, H		2622	348-231400	J			
Change of corresp Address form PTO/SE Thee Address* indi PTO/SB/47: Rev 03-0 Number is required.	ence address or indication ondence address (or Cha 3/122) attached. ication (or "Fee Address" 2 or more recent) attach ND RESIDENCE DATA ess an assignee is identi	nge of Correspondence Indication form ed. Use of a Customer	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type)				
771 S.A.ME OF A55R	n in 37 CFR 3.11. Comp INEE rd Development C		ata will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment. (B) RESIDENCE: (CTTY and STATE OR COUNTRY) Houston, Texas				
% asir check the appropri	ate assignee category or	categories (will not be pr	inted on the patent)	Individual ACoir	poration of other private gro	oun entity [] Government	
The following feets) a State Fee State Fee Publication Fee (No. 1) Advance Order #	ore submitted: or small entity discount proof Copies	4b ermitted)	b. Payment of Fee(s) (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card Form PTO-2038 is attached The Director is hereby authorized to charge be conjugately fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
a. Applicant claims	us (from status indicated SMALL ENTITY status	above) s. See 37 CFR 1.27.	b. Applicant is no lone	per claiming SMALL	ENTITY status See 17 CT	2D 1 27/- v.)	
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Authorized Signature	MA	leut -			10, 2008		
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